## Reset Form

## DISCLOSURE SUMMARY PAGE

	Lickinson
TIONS, SEE BACK OF FORM RE SUMMARY PAGE	
Prganization)	
LIFE	FORM
or: 11   e (2)State PAC (3)State Party indidate (7)School Board or Other Politica iool Board or Other Political Subdivision PAC	For Office Use Orfly
Political Party (if applicable)	Comm. #
District (if Senate or House)	Computer Audited
Pursuant to Iowa Code sections 68B.32A  112-332-5646  TELEPHONE	
REPORT FOR (1) ELECTION	(2)NON-ELECTION YEAR.
Indicate by #	2
	Local Committees, enter Date of Election
e of Dissolution Form DR-3. ed.)	County & Local Committees, enter County in which Election is held
ND .	
Total of all funds held by the	2751.36
, , , , , , , , , , , , , , , , , , , ,	
dule A) (*also see in-kind below)	
edule A) (*also see in-kind below)e	
e F)tach Schedule H)	
e F)	
e F)tach Schedule H)nmittees Only) SUB-TOTAL	2.70.37
e F)tach Schedule H)nmittees Only)	2.70.37
tach Schedule H)  SUB-TOTAL  D  (**also see debts and loans below)	2,751.36
e F)tach Schedule H)nmittees Only)  SUB-TOTAL	2,751.36
tach Schedule H)  SUB-TOTAL  D  (**also see debts and loans below)	2,751.36 2,751.36
tach Schedule H)  nmittees Only)  SUB-TOTAL  D  (**also see debts and loans below)  ule F)  eport balance must be zero)	2,751.36 2,751.36
tach Schedule H)	2,751.36 2,751.36 
	Pursuant to lowa Code sections 68B.32A  TELEPHONE  REPORT FOR (1) ELECTION Indicate by #  or Other Political Subdivision PAC  Political Party (if applicable)  District (if Senate or House)  Pursuant to lowa Code sections 68B.32A  TELEPHONE  REPORT FOR (1) ELECTION Indicate by #  or of Dissolution Form DR-3.  ed.)

9	Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
<b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTE	E NAME (Must be	same as on Statement of Organization)			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSI (DESCRIBE TRAN:	E SACTION)	AMOUNT EXPENDED
12-28-07	ID#	Historic Arnolds Auk, Lnc.	transfer of Camp ascets to non-	paisn Arofit	\$ 2,751.36
	CK#				
·	ID# CK#			<del></del>	
	ID# CK#				
. [	ID# CK#				
	ID# CK#				
1	ID# CK#				
	ID# CK#				
				SUB-TOTAL	\$ 7

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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TOTAL (if last page of this schedule)